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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	YAMAP0769US
	First Inventor	Ogata
	Title	AUDIO AND VIDEO RECORDING ...
	Express Mail Label No.	EF232849730US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 18] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5] 5. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed) b. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input checked="" type="checkbox"/> Other: Certificate of Mailing:
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17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No. _____
Prior application information		Examiner _____	Group / Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>18. CORRESPONDENCE ADDRESS</b> <input type="checkbox"/> Customer Number or Bar Code Label <input type="checkbox"/> Correspondence address below					
Name: Neil A. DuChez Address: Renner, Otto, Boisselle, & Sklar, L.L.P. 1621 Euclid Avenue, 19th Floor City: Cleveland State: OH Zip Code: 44115 Country: USA Telephone: (216)621-1113 Fax: (216)621-6165					

Name (Print/Type)	Neil A. DuChez	Registration No. (Attorney/Agent)	26,725
Signature		Date	6-22-01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ ) 750.00

## Complete if Known

Application Number	EF232849730US
Filing Date	June 22, 2001
First Named Inventor	Ogata
Examiner Name	
Group Art Unit	
Attorney Docket No.	YAMAP0769US

## METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number: 18-0988
- Deposit Account Name: Renner, Otto, Boisselle, & Sklar
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27
2. ☒ Payment Enclosed:
- ☒ Check ☐ Credit card ☐ Money Order ☐ Other

## FEE CALCULATION (continued)

3. ADDITIONAL FEES					Fee Description	Fee Paid
Large Entity Fee Code	Small Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)			
105	130	205	65	Surcharge - late filing fee or oath		
127	50	227	25	Surcharge - late provisional filing fee or cover sheet		
139	130	139	130	Non-English specification		
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination		
112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
115	110	215	55	Extension for reply within first month		
116	390	216	195	Extension for reply within second month		
117	890	217	445	Extension for reply within third month		
118	1,390	218	695	Extension for reply within fourth month		
128	1,890	228	945	Extension for reply within fifth month		
119	310	219	155	Notice of Appeal		
120	310	220	155	Filing a brief in support of an appeal		
121	270	221	135	Request for oral hearing		
138	1,510	138	1,510	Petition to institute a public use proceeding		
140	110	240	55	Petition to revive - unavoidable		
141	1,240	241	620	Petition to revive - unintentional		
142	1,240	242	620	Utility issue fee (or reissue)		
143	440	243	220	Design issue fee		
144	600	244	300	Plant issue fee		
122	130	122	130	Petitions to the Commissioner		
123	50	123	50	Petitions related to provisional applications		
126	240	126	240	Submission of Information Disclosure Stmt		
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))		
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))		
179	710	279	355	Request for Continued Examination (RCE)		
169	900	169	900	Request for expedited examination of a design application		
Other fee (specify) _____						
* Reduced by Basic Filing Fee Paid						
SUBTOTAL (3)					(\$ ) 40.00	

## FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid		
101	710	201	355	Utility filing fee	710.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)					(\$ ) 710.00

2. EXTRA CLAIM FEES

Total Claims: 11 - 20\*\* = 0 X 18.00 = 0

Independent Claims: 1 - 3\*\* = 0 X 80.00 = 0

Multiple Dependent: \_\_\_\_\_ = \_\_\_\_\_

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid		
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$ ) 0.00

\*\*for number previously paid, if greater, For Reissues, see above

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Neil A. DuChes	Registration No (Attorney/Agent)	26,725
Signature		Telephone	(216)621-1113
		Date	6-22-01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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[illegible]

Janet Farr  
Typed or Printed Name of Person Mailing Paper

Janet Lane  
(Signature of Person Mailing Paper)